

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Women Speak Out PAC			FEC IDENTIFICATION NUMBER ▼ C C00530766		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Brandon Wheeler			Date of Public Distribution/Dissemination 10 / 23 / 2014		
Mailing Address 10112 Piney Creek Ct			Amount 21.30		
City Charolette	State NC	Zip Code 28215	Transaction ID : f02f6997-a4b7-4576-b Date of Disbursement or Obligation 10 / 23 / 2014		
Purpose of Expenditure Mileage		Category/ Type 002			
Name of Federal Candidate Mr. Mark L Pryor			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AR</u> <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 292370.62			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee Lucas H Hoyle			Date of Public Distribution/Dissemination 10 / 23 / 2014		
Mailing Address 282 Falls Ave			Amount 40.00		
City Granite Falls	State NC	Zip Code 28630	Transaction ID : cf4f8438-073b-423f-8 Date of Disbursement or Obligation 10 / 23 / 2014		
Purpose of Expenditure Salary		Category/ Type 001			
Name of Federal Candidate Ms. Kay Hagan			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 1095959.94			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			61.30		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Ms. Emily Buchanan</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 06 / 25 / 2015		